

IN THE UNITED STATES BANKRUPTCY COURT
FOR THE DISTRICT OF PUERTO RICO

IN RE:

EVELYN ALVARADO NEGRON

DEBTOR(S)

CASE NUMBER: 15-03594/BKT

CHAPTER 7

**DEBTOR'S MOTION CONCERNING AMENDMENT
TO SCHEDULE "E/F" OFFICIAL FORM 106E/F**

TO THE HONORABLE COURT:

COMES NOW, EVELYN ALVARADO NEGRON, the Debtor through her undersigned attorney Counsel, and very respectfully states and prays as follows:

1. The Debtor hereby amends Schedule "E/F" to previously filed Schedule "E/F" docket no. 1, pursuant to Rule 1009 of the Federal Rules of Bankruptcy Procedure and local Bankruptcy Rule 1009-1, for the purpose of: **include unsecured claim, account no. X2838037006 from creditor U.S. Small Business Administration, Disaster Assistance, 14925 Kingsport Road, Fort Worth TX 76155, balance owed \$25,000.00.**

WHEREFORE, the Debtor prays that this Honorable Court take knowledge of said amendment and provide accordingly.

NOTICE

Within fourteen (14) days after service as evidenced by the certification, and an additional three (3) days pursuant to Fed. R. Bank. P. 9006(f) if you were served by mail, any party against whom this paper has been served, or any other party to the action who objects to the relief sought herein, shall serve and file an objection or other appropriate response to this paper with the Clerk's office of the U.S. Bankruptcy Court for the District of Puerto Rico. If no objection or other response is

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Debtors' Motion Concerning Amendment to Schedule "E/F"
Case no. 15-03594/BKT7

filed within the time allowed herein, the paper will be deemed unopposed and may be granted unless: (i) the requested relief is forbidden by law; (ii) the requested relief is against public policy; or (iii) in the opinion of the Court, the interest of justice requires otherwise.

CERTIFICATE OF SERVICE: I hereby certify that on this date I electronically filed the above document with the Clerk of the Court using the CM/ECF System which sends notification of such filing to all those who in this case have registered for receipt of notice by electronic mail, including the US Trustee's Office and the Trustee. I further certify that the foregoing has been served by depositing true and correct copies thereof in the United States Mail, postage prepaid, to none CM/ECF participants: Debtor to his address of record; to the creditor affected by the amendment: United States Attorney District of Puerto Rico, Rosa Emilia Rodriguez Esq, Room 150 Federal Bldg, San Juan Puerto Rico 00917; Attorney General of the United States, William Barr, Esq, 950 Pennsylvania Ave NW, Washington DC 20530-0001; U.S. Small Business Administration, Disaster Assistance, 14925 Kingsport Road, Ford Worth TX 76155; and creditors and parties in interest as per the attached master address list.

RESPECTFULLY SUBMITTED. In San Juan, Puerto Rico, this 16th day of August, 2019.

/s/Roberto Figueroa Carrasquillo
R FIGUEROA CARRASQUILLO LAW OFFICE PSC
USDC #203614
ATTORNEY FOR PETITIONER
PO BOX 186
CAGUAS PR 00726
TEL. NO. (787) 744-7699
FAX (787) 746-5294
EMAIL: rfc@rfigueroalaw.com

Fill in this information to identify your case:

Debtor 1 EVELYN ALVARADO NEGRON
First Name Middle Name Last Name

Debtor 2
(Spouse if, filing) First Name Middle Name Last Name

United States Bankruptcy Court for the: DISTRICT OF PUERTO RICO

Case number 3:15-bk-3594
(if known)

☐ Check if this is an amended filing

Official Form 106E/F

Schedule E/F: Creditors Who Have Unsecured Claims

12/15

Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on Schedule A/B: Property (Official Form 106A/B) and on Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G). Do not include any creditors with partially secured claims that are listed in Schedule D: Creditors Who Have Claims Secured by Property. If more space is needed, copy the Part you need, fill it out, number the entries in the boxes on the left. Attach the Continuation Page to this page. If you have no information to report in a Part, do not file that Part. On the top of any additional pages, write your name and case number (if known).

Part 1: List All of Your PRIORITY Unsecured Claims

1. Do any creditors have priority unsecured claims against you?

- ☒ No. Go to Part 2.
☐ Yes.

Part 2: List All of Your NONPRIORITY Unsecured Claims

3. Do any creditors have nonpriority unsecured claims against you?

- ☐ No. You have nothing to report in this part. Submit this form to the court with your other schedules.
☒ Yes.

4. List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. If a creditor has more than one nonpriority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. If you have more than three nonpriority unsecured claims fill out the Continuation Page of Part 2.

Total claim

<div style="border: 1px solid black; padding: 2px; width: 40px; float: left; margin-right: 10px;">4.1</div> <p>Depto De Transportacion Y Obras Publicas <small>Nonpriority Creditor's Name</small></p> <p>PO Box 41269 San Juan, PR 00940-1269 <small>Number Street City State Zip Code</small></p> <p>Who incurred the debt? Check one.</p> <p><input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>Last 4 digits of account number <u>3585</u></p> <p>When was the debt incurred? _____</p> <p>As of the date you file, the claim is: Check all that apply</p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Type of NONPRIORITY unsecured claim:</p> <p><input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts</p> <p><input checked="" type="checkbox"/> Other. Specify <u>#Ticket: 14857300 =\$100.00; #Ticket: 14471315 =\$100.00; #Ticket: 295000532 =\$50.00; #Ticket: 14176186 =\$100.00</u></p>	<p><u>\$350.00</u></p>
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Debtor 1 ALVARADO NEGRON, EVELYN

Case number (if known)

3:15-bk-3594

4.2	First Bank Of Puerto Rico Nonpriority Creditor's Name PO Box 9146 San Juan, PR 00908-9146 Number Street City State Zip Code Who incurred the debt? Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Last 4 digits of account number <u>2505</u> When was the debt incurred? _____ As of the date you file, the claim is: Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>INSTALLMENT ACCOUNT OPENED 7/2013</u>	<u>\$4,561.00</u>
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4.3	Island Finance Nonpriority Creditor's Name PO Box 71504 San Juan, PR 00936 Number Street City State Zip Code Who incurred the debt? Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Last 4 digits of account number <u>5791</u> When was the debt incurred? _____ As of the date you file, the claim is: Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>INSTALLMENT ACCOUNT OPENED 3/2013</u> <u>Personal Loan</u>	<u>\$4,369.00</u>
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4.4	Liberty Cablevision Of PR Nonpriority Creditor's Name PO Box 719 Luquillo, PR 00773 Number Street City State Zip Code Who incurred the debt? Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Last 4 digits of account number <u>8622</u> When was the debt incurred? _____ As of the date you file, the claim is: Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>Cablevision Utility</u>	<u>\$484.40</u>
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Debtor 1 ALVARADO NEGRON, EVELYN

Case number (if known)

3:15-bk-3594

<p>4.5 U.S Small Business Administration Nonpriority Creditor's Name Disaster Assistance 14925 Kingsport Road Fort Worth, TX 76155 Number Street City State Zip Code Who incurred the debt? Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>Last 4 digits of account number <u>7006</u> <u>\$25,000.00</u> When was the debt incurred? <u>2018</u> As of the date you file, the claim is: Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify _____</p>
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Part 3: List Others to Be Notified About a Debt That You Already Listed

5. Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

<p>Name and Address Money Express PO Box 11890 Loan #:08-28250-5 San Juan, PR 00922-1890</p>	<p>On which entry in Part 1 or Part 2 did you list the original creditor? Line <u>4.2</u> of (Check one): <input type="checkbox"/> Part 1: Creditors with Priority Unsecured Claims <input checked="" type="checkbox"/> Part 2: Creditors with Nonpriority Unsecured Claims</p>
<p>Name and Address Quantum3 Group LLC PO Box 788 Kirkland, WA 98083-0788</p>	<p>On which entry in Part 1 or Part 2 did you list the original creditor? Line <u>4.3</u> of (Check one): <input type="checkbox"/> Part 1: Creditors with Priority Unsecured Claims <input checked="" type="checkbox"/> Part 2: Creditors with Nonpriority Unsecured Claims</p>
<p>Name and Address Transworld Systems Inc 507 Prudential Rd Caguas Coop #:8228630100303695 Horsham, PA 19044-2308</p>	<p>On which entry in Part 1 or Part 2 did you list the original creditor? Line <u>4.4</u> of (Check one): <input type="checkbox"/> Part 1: Creditors with Priority Unsecured Claims <input checked="" type="checkbox"/> Part 2: Creditors with Nonpriority Unsecured Claims</p>

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

		Total Claim	
Total claims from Part 1	6a. Domestic support obligations	6a. \$	<u>0.00</u>
	6b. Taxes and certain other debts you owe the government	6b. \$	<u>0.00</u>
	6c. Claims for death or personal injury while you were intoxicated	6c. \$	<u>0.00</u>
	6d. Other. Add all other priority unsecured claims. Write that amount here.	6d. \$	<u>0.00</u>
	6e. Total Priority. Add lines 6a through 6d.	6e. \$	<u>0.00</u>
		Total Claim	
Total claims from Part 2	6f. Student loans	6f. \$	<u>0.00</u>
	6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g. \$	<u>0.00</u>
	6h. Debts to pension or profit-sharing plans, and other similar debts	6h. \$	<u>0.00</u>
	6i. Other. Add all other nonpriority unsecured claims. Write that amount here.	6i. \$	<u>34,764.40</u>

Debtor 1 ALVARADO NEGRON, EVELYN

Case number (if known) 3:15-bk-3594

6j. Total Nonpriority. Add lines 6f through 6i.

6j. \$ 34,764.40

Fill in this information to identify your case:			
Debtor 1	<u>EVELYN ALVARADO NEGRON</u>		
	First Name	Middle Name	Last Name
Debtor 2 (Spouse if, filing)	<u></u>		
	First Name	Middle Name	Last Name
United States Bankruptcy Court for the:	<u>DISTRICT OF PUERTO RICO</u>		
Case number (if known)	<u>3:15-bk-3594</u>		

☐ Check if this is an amended filing

Official Form 106Dec

Declaration About an Individual Debtor's Schedules

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Sign Below

Did you pay or agree to pay someone who is NOT an attorney to help you fill out bankruptcy forms?

☒ No

☐ Yes. Name of person _____

Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119)

Under penalty of perjury, I declare that I have read the summary and schedules filed with this declaration and that they are true and correct.

Evelyn Alvarado Negron
EVELYN ALVARADO NEGRON
Signature of Debtor 1

X

Signature of Debtor 2

Date

8/16/2019

Date

Label Matrix for local noticing
0104-3
Case 15-03594-BKT7
District of Puerto Rico
Old San Juan
Thu Aug 8 13:46:50 AST 2019

MONEY EXPRESS
MARIA M BENABE RIVERA
PO BOX 9146
SAN JUAN, PR 00908-0146

US Bankruptcy Court District of P.R.
Jose V Toledo Fed Bldg & US Courthouse
300 Recinto Sur Street, Room 109
San Juan, PR 00901-1964

Coop A/c San Rafael
1 Rafael Rodriguez Canal
Quebradillas, PR 00678-1720

EASTERN AMERICA INSURANCE CO
PO BOX 9023862
SAN JUAN PR 00902-3862

Island Finance
PO Box 71504
San Juan, PR 00936-8604

Money Express
Loan #:08-28250-5
PO Box 11890
San Juan, PR 00922-1890

Sistema De Retiro Para Maestros
PO Box 191879
San Juan, PR 00919-1879

JOSE RAMON CARRION MORALES
PO BOX 9023884
SAN JUAN, PR 00902-3884

WIGBERTO LUGO MENDER
LUGO MENDER & CO
CENTRO INTERNACIONAL DE MERCADEO
100 CARR 165 SUITE 501
GUAYNABO, PR 00968-8052

COOP A/C ORIENTAL
PO BOX 876
HUMACAO, PR 00792-0876

POPULAR AUTO
PO BOX 366818
SAN JUAN, PR 00936-6818

Banco Popular De Puerto Rico
PO Box 50045
San Juan, PR 00902

Coop A/c San Rafael
1 Rafael Rodriguez Canal
Quebradillas, PR 00678-1720

FEDECOOP
PO BOX 270-275
SAN JUAN PR 00928-3075

Liberty Cablevision Of PR
PO Box 719
Luquillo, PR 00773-0719

POPULAR AUTO
BANKRUPTCY DEPARTMENT
PO BOX 366818
SAN JUAN PUERTO RICO 00936-6818

Transworld Systems Inc
Caguas Coop #:8228630100303695
507 Prudential Rd
Horsham, PA 19044-2308

MONSITA LECAROS ARRIBAS
OFFICE OF THE US TRUSTEE (UST)
OCHOA BUILDING
500 TANCA STREET SUITE 301
SAN JUAN, PR 00901

Cooperativa A/C San Rafael
PO BOX 1531
QUEBRADILLAS, PR 00678-1531

Quantum3 Group LLC as agent for
Sadino Funding LLC
PO Box 788
Kirkland, WA 98083-0788

COOP A/C SAN RAFAEL
PO BOX 1531
QUEBRADILLAS, PR 00678-1531

Depto De Transportacion Y Obras Publicas
PO Box 41269
San Juan, PR 00940-1269

First Bank Of Puerto Rico
PO Box 9146
San Juan, PR 00908-0146

MONEY EXPRESS
CONSUMER SERVICE CENTER
BANKRUPTCY DIVISION (CODE 248)
PO BOX 9146
SAN JUAN PR 00908-0146

SANTANDER FINANCIAL D/B/A ISLAND FINANCE
PO BOX 195369
SAN JUAN PR 00919-5369

EVELYN ALVARADO NEGRON
B36 REPARTO KENNEDY
PENUELAS, PR 00624

ROBERTO FIGUEROA CARRASQUILLO
PO BOX 186
CAGUAS, PR 00726-0186

The following recipients may be/have been bypassed for notice due to an undeliverable (u) or duplicate (d) address.

(u)US TRUSTEE-REGION 21

(d)COOP A/C ORIENTAL
PO BOX 876
Humacao, PR 00792-0876

(d)Quantum3 Group LLC as agent for
Sadino Funding LLC
PO Box 788
Kirkland, WA 98083-0788

End of Label Matrix
Mailable recipients 27
Bypassed recipients 3
Total 30